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CONFIRMATION NO. 4564

<b>SERIAL NUMBER</b> 10/695,444	<b>FILING OR 371(c) DATE</b> 10/29/2003 <b>RULE</b>	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2611	<b>ATTORNEY DOCKET NO.</b> 14730-1US CMB/AA/mb	
<b>APPLICANTS</b> Daniel Massicotte, Trois-Rivieres, CANADA; <i>AE</i> Adel-Omar Dahmane, Trois-Rivieres, CANADA;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/421,806 10/29/2002 <i>AE</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>AE</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 02/06/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>AE</i> Acknowledged <i>AE</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 21	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> AIR MAIL 20988					
<b>TITLE</b> Cascade filter receiver for DS-CDMA communication systems					
<b>FILING FEE RECEIVED</b> 567	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		